

Franklin County Health Department
Division of Environmental Health
107 Industrial Drive-Suite C
Louisburg, North Carolina 27549

PAGE 1 OF 2

Phone: 919-496-8100

SEPTIC PERMIT

Fax: 919-496-8136

Permit Number: 11008 Type: I PIN: 2739-33-3064 Date: 4/8/2019

Applicant: BRANDYWINE HOMES
PO BOX 910
WAKE FOREST, NC 27588

Owner: SLEDGE FARM
9 MCKNIGHT AVE
, 27607

Telephone: (919) 427-8982

Telephone:

Subdivision: SLEDGE FARM

Lot Number: 46

Size: 0.710

Physical Address/ Location /Directions 25 S TREELINE DR

Description: LifeTime

5 Year



TYPE FACIL SFD # EMPLOY N/A # BEDRMS 3 GPD 360 LTAR .3

TYPE WAT Well TYPE SYS Pto Acc TYPE REP Pto Acc BSMT N BST FX N/A

SIZE TANK 1000 SIZE CHB N/A SIZE NTR 3' x 200' MTD 28"

COMMENTS: Install on contour. Maintain proper setbacks.

Septic Contractors are responsible for notifying the health department for final inspections, between 8:00-9:00 AM on the day of completion, Monday - Friday. Any request for final inspections received afterwards will be scheduled the same day, if possible, or the next workday. Have permit number and owner/applicant's name ready when making the call.

Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect the compliance with the provisions of this permit shall in no way be taken as a guarantee that wastewater disposal systems permitted and approved will function in a satisfactory manner for any given period of time, or that such employees assume any liability for damages, consequential or direct which are caused, or may be caused, by a malfunction of this wastewater treatment and disposal system.

Proper precautions must be taken to assure the proper functioning of the system after it has been covered. Do not run any heavy equipment over the system, as soft earth will allow damage to the tank and lines. Pipe all roof drains away from the septic system site to prevent flooding of the lines from surface water. Terrace the ground to prevent excessive drainage from higher areas adjacent to the system. Do not construct driveways over any part of the septic system unless proper provisions were made when the septic system was constructed. Only grass, not trees or shrubbery, should be cultivated over the lines. All plumbing fixtures should be carefully inspected periodically and any problems repaired immediately. All septic tanks should be pumped off by a permitted pump operator on a regular schedule, not to exceed every five years.

The improvement permit and construction authorization is a site approval, for the future installation of a wastewater treatment and disposal system. Changes in ownership of the site do not affect the validity of this permit. However, any alteration of the site or soil conditions, changes in the location of the proposed facility, changes to the wastewater flow and/or characteristics, or submittal of false information with the application or misrepresentation of the property lines may subject this permit to suspension or revocation.

FOR THIS TO BE A VALID CONSTRUCTION AUTHORIZATION, A LAYOUT SHEET MUST BE ATTACHED

IMPROVEMENT PERMIT

DATE

4-18-19

EHS

Joel Berdel

CONSTRUCTION AUTHORIZATION

DATE

4-18-19

EHS

Joel Berdel

Visit www.franklincountyenvironmentalhealth.com for permit information and tracking.

Franklin County Health Department

Name: BRANDYWINE HOM

Permit Number

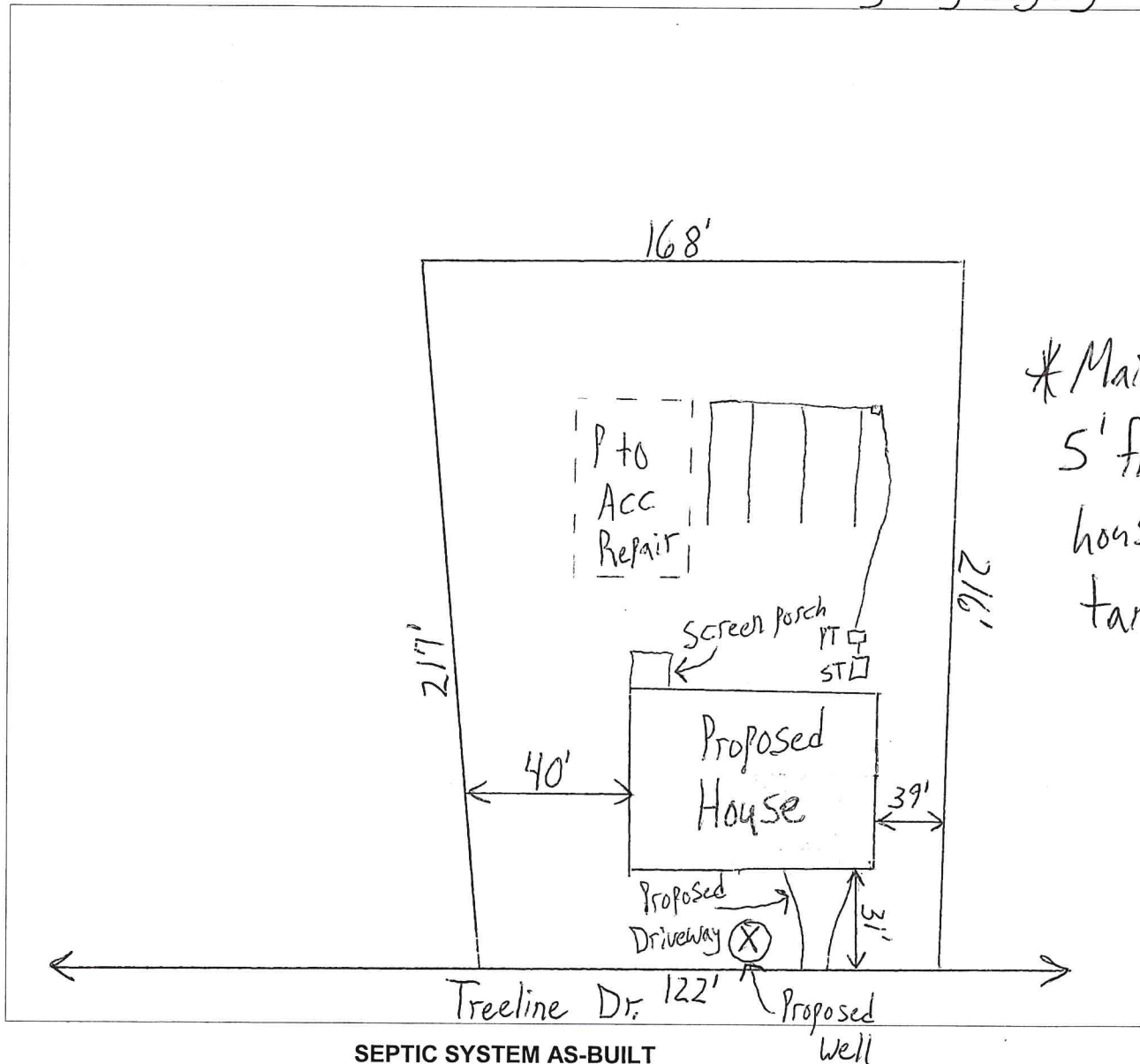
11008

CONTRACTOR _____ TANK MANU _____ MANU DATE _____

WELL INSTALLED YES _____ NO _____ SYSTEM CODE _____

SEPTIC SYSTEM LAYOUT (SKETCH SYSTEM LAYOUT HERE)

*Drawing not to Scale
*Layout may vary slightly



SEPTIC SYSTEM AS-BUILT
(IF DIFFERENT FROM INITIAL LAYOUT)
ON REVERSE

OPERATIONS PERMIT

DATE _____ EHS _____

Franklin County Health Department
Division of Environmental Health
107 Industrial Drive-Suite C
Louisburg, North Carolina 27549

PAGE 1 OF 2

Phone: 919-496-8100

Well Permit

Fax: 919-496-8136

Permit Number: 11008 Type: N PIN : 2739-33-3064 Date: 4/8/2019

Applicant: BRANDYWINE HOMES Owner: SLEDGE FARM
PO BOX 910 9 MCKNIGHT AVE
WAKE FOREST, NC 27588 , 27607

Telephone: (919) 427-8982 Telephone:

Subdivision: SLEDGE FARM Lot Number: 46 Size: 0.710

Physical Address/ Location /Directions 25 S TREELINE DR

WELL INFORMATION:

WELL TYPE: _____ D WELL DEPTH: _____ FT WELL YIELD: _____ GPM
STAT LEVEL: _____ FT CASE TYPE: _____ P CASE DEPTH: _____ FT

COMMENTS:

THE WELL OWNER IS RESPONSIBLE FOR CONTACTING THE HEALTH DEPARTMENT AS SOON AS POSSIBLE AFTER THE POWER IS CONNECTED, BUT NO LATER THAN 30 DAYS AFTER THE CERTIFICATE OF COMPLETION DATE, IN ORDER TO REQUEST WATER SAMPLES.

Well drilling contractors are responsible for notifying the Health Department for grouting inspections. The well driller or pump installer is responsible for requesting the well head inspection. Calls must be made to the Health Department between 8:00-9:00 AM on the day of the inspection, Monday-Friday. Any request for grouting or well head inspections requested afterwards will be scheduled the same day, if possible, or the next workday. Have permit number and owner/applicants name ready when making the call.

Actions of representatives of state or local agencies engaged in the evaluation and determination of measures required to effect the compliance with the provisions of this permit shall in no way be taken as a guarantee as to the quality or quantity of water produced by the well.

A well construction permit or repair permit shall be valid for a period of five years, except that the Health Department may revoke a permit, at any time, if it determines that there has been a material change in any fact or circumstance upon which the permit is issued. The validity of a construction permit or repair permit shall not be affected by a change in ownership of the site on which a private drinking water well is proposed to be located. The Health Department may suspend or revoke any permits issued upon a determination that the provisions of these regulations have been violated.

CONSTRUCTION AUTHORIZATION

DATE: 4-18-19

EHS: Joel Bendel

GROUT INSPECTION

DATE: _____

EHS: _____

WELL HEAD INSPECTION

DATE: _____

EHS: _____

CERTIFICATE OF COMPLETION

DATE: _____

EHS: _____

Franklin County Health Department

Name: BRANDYWINE HOM

Permit Number 11008

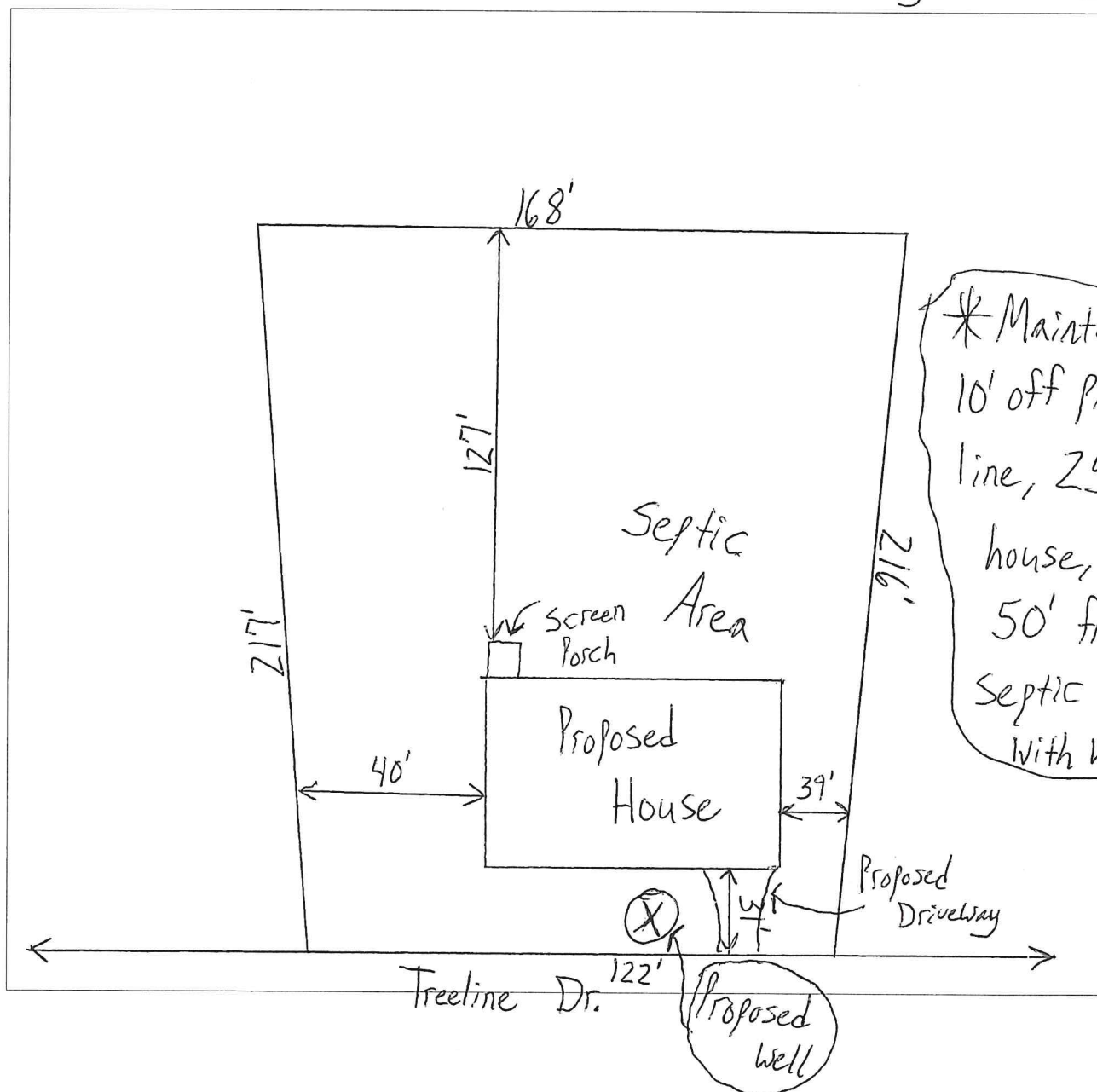
LOCATION LAT N 36 ° ' LONG W 78 ° 0

WELL DRILLING CONTRACTOR: _____ REG #: 0

PUMP INSTALLER: _____ REG #: 0

SEPTIC SYSTEM LAYOUT AND WELL LOCATION

* Drawing not to Scale



OWNER: Brandywine Homes APPLICATION DATE: 4-8-19
 ADDRESS: _____ DATE EVALUATED: 4-17-19
 PROPOSED FACILITY: SFD PROPOSED DESIGN FLOW (1949): 240-360 PROPERTY SIZE: .71
 LOCATION OF SITE: 25 Traceline Dr, Lsb9 PROPERTY RECORDED: _____
 WATER SUPPLY: Private ☐ Public ☒ ~~Well~~ Spring ☐ Other _____
 EVALUATION METHOD: Auger Boring Pit ☐ Cut ☐ TYPE OF WASTEWATER: Sewage Industrial Process ☐ Mixed ☐

P R O F I L E #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	Z-4%	1-10	Gr/SL	Fr/NS/NP/SELP		48"			. 3
		10-48	Bk/CL	Fi/SS/SP/SELP					
2	Z-4%	1-12	Gr/SL	Fr/NS/NP/SELP		40"			. 3
		12-42	Bk/CL	Fi/SS/SP/SELP					
		40" SAP							
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946):
Available Space (.1945)	yes	yes	SITE CLASSIFICATION (.1948): <u>PS</u>
System Type(s)	Pto Acc	Pto Acc	EVALUATED BY: <u>Joel Bendel</u>
Site LTAR	.3	.3	OTHER(S) PRESENT: _____



COUNTY OF FRANKLIN

ENVIRONMENT HEALTH APPLICATION (496-8100)

Permit #: 51480

Permit Type: WELL/SEPTIC

Date Issued: 04/08/2019

Project Address: 25 S TREELINE DR, LOUISBURG NC 27549

Location: 25 S TREELINE DR

Subdivision: SLEDGE FARM

Size #: 0.710

Applicant: BRANDYWINE HOMES INC

Lot #: 46

PO BOX 910

Phone: 919.427.8982

WAKE FOREST NC 27588

Owner Name: SLEDGE FARM LLC

Address: 9 MCKNIGHT AVE

Phone:

27607

Tax record: 37820

Pin #: 2739-33-3064

Parcel #: K12B00 046

Zoned: R-30

Setbacks Front: 30

Rear: 25

Side: 10

Proposed Use: SFD

of bedrooms: 3

of people: 2

Township: DUN

Public Water/Sewer:

Desc:

Fees Due: \$800.00

Date Paid: 04/08/2019

* Please complete all sections below*

☐ Yes ☐ No Does this site contain any previously identified jurisdictional wetlands?
☐ Yes ☐ No Is any wastewater, other than domestic, going to be generated?
☐ Yes ☐ No Is the site subject to approval by any other public agency?

*If the answer to any of the above is "yes", applicant must submit supporting documentation.

Please indicate desired system type(s). Systems can be ranked in order of preference.

☐ Conventional ☐ Accepted ☐ Modified Conventional ☐ Alternative
☐ Other ☐ No Preference

Call Environmental Health (919.496.8100) between 8:00 - 9:00 am Monday - Friday in order to schedule an appointment with an environmental health specialist for your lot evaluation. This application for an improvement permit/construction authorization and well permit does not constitute approval for zoning, septic or building permits. It will be necessary to meet all guidelines for zoning, septic and building permits prior to construction. The permit is valid for either 60 months or without expiration, depending upon documentation submitted. (complete site plan= 60 months---complete surveyed plat=without expiration.)

Please contact the Environmental Health Department at 919.496.8100 or visit their website at www.franklincountyenvironmentalhealth.com to determine the status of your application prior to visiting the Planning & Inspections Department to obtain a building permit.

I hereby certify that I am the owner, or authorized by the owner to act as his/her legal representation. Furthermore, as legal representative (if applicable) I have advised the owner of my intention to apply for this wastewater treatment and disposal system and drinking water and well system permit.

I also certify that all of the statements made in this application and any attached documents are true, complete, and correct, to the best of my knowledge and belief, and are made in good faith. If information in this application for these improvements is falsified, changed or site is altered, then improvement permits and authorization to construct these improvements shall become invalid. Authorized county representatives are granted right of entry to make these evaluations or inspections, and to release information upon public request.

X
Print & Signature of Owner or Owner's Legal Representative

04/08/2019



COUNTY OF FRANKLIN
ENVIRONMENT HEALTH APPLICATION (496-8100)

Lot Preparation

The applicant is responsible for preparing for a site evaluation by an Environmental Health Specialist.

The applicant must address EACH of the items listed below prior to the evaluation. (Note: A separate application and site plan must be submitted for each proposed septic system/lot. An individual evaluation may encompass an area up to 3 acres in size.)

1. **Site Plan:** A site plan must be submitted with your application. The site plan must show property dimensions, the desired location and size of proposed structures (including decks, storage buildings, sheds, pools, etc), driveways, and jurisdictional wetlands (if applicable.) A sample site plan is available upon request.
2. **Property Lines:** All property lines and corners within 250 feet of the proposed house site must be clearly marked and readily identifiable. If you are proposing to subdivide property, the proposed property lines must be clearly marked.
3. **Clearing:** In order to conduct a site evaluation, the lot must be easily accessible. If fallen trees, underbrush, or other obstacles prevent free movement across the property, then clearing will be required. Soil disturbance must be minimized during the clearing process in order to avoid removing natural soil and adversely affecting site/soil characteristics.
4. **House/structure:** The proposed location of a house or any other structure must be marked on the property.
5. **Confirmation:** Once all the items listed above have been completed, the applicant may contact Franklin County Environmental Health (919-496-8100) for evaluation. The Environmental Health Specialist assigned to evaluate your lot will give you a time of when your lot evaluation should be completed.

Important:

** If a site plan is incomplete or changes are made after the on-site evaluation, a \$50.00 revisit fee may be assessed.

** If an Environmental Health Specialist arrives at the property and a site evaluation cannot be conducted because the site has not been prepared as required, the applicant will be notified and the application placed in "Inactive" status.

**After the site has been properly prepared, the applicant may contact Environmental Health for the application to become active again.

**A revisit fee (\$50.00) may be assessed prior to scheduling another visit to the property.

If you have any questions regarding the information listed above, please feel free to contact our office at 919-496-8100. Our office hours are Monday - Friday, from 8:00AM to 5:00PM.

My signature below indicates that I have read the information listed above and that the property will be prepared for an evaluation in accordance with these instructions before scheduling an evaluation. I understand that if the conditions outlined above have not been met, the application will be placed on "Inactive" status and a \$50.00 revisit fee may be assessed before rescheduling.

Location: 25 S TREELINE DR

X

Opal E. Cunningham
David Cunningham

Print & Signature of Owner or Owner's Legal Representative

04/08/2019

51481

lien

Franklin County Development Permit

RESIDENTIAL

Zoning Permit #: X2794

ADDRESS: 25 S TREELINE DR

PARCEL NO.: 2739-33-3064

ZONING: R-30

SUBDIVISION: SLEDGE FARM

LOT: 46

ISSUED TO: BRANDYWINE HOMES INC.

PO BOX 910

WAKE FOREST, NC 27588

PHONE NUMBER: 919-427-8982

SETBACK: FRONT: 30

RIGHT: 10

LEFT: 10

REAR: 25

COUNTY WATER: NO

FLOODPLAIN: NO

MISC FEE:

PERMIT TYPE: ZONING PERMIT

TYPE OF CONSTRUCTION: SFD - NEW SEPTIC/WELL

PERMIT DATE: 04/08/2019

WATERSHED NO

TOWNSHIP DUN

EXPIRE DATE: 10/08/2019



Changed #
of BR's
to 3

3/12

It is hereby certified that the above use as shown on the plats and plans submitted with this application conforms with all applicable provisions of the Franklin County Zoning Ordinance. The issuance of this application does not allow the violation of Franklin County Zoning Ordinance or other governing regulations. The applicant is responsible for obtaining a building permit (if required) prior to commencing work on the proposed improvement. A final zoning inspection must be scheduled by the applicant.

NOTES:

I hereby certify that all information I have provided to the Planning Department is true and accurate.

APPLICANTS SIGNATURE:

Devin S. Cunningham

UTILITY COMPANY: PROGRESS ENERGY

WAKE ELECTRIC

OTHER

NUMBER OF STORIES: 1 X 1 1/2 2 2 1/2SQUARE FOOTAGE: HEATED 1432 UNHEATED 605 TOTAL 2037BASEMENT: YES NOFIREPLACE: NO MASONRY MANUFACTURED ✓PLAN SETS: MODULAR STICKBUILT TRUSS

NAME OF:

ELECTRICIAN: The Electrician Physician MECHANICAL: Casey ServicesPLUMBING: Whites PlumbingCOST OF CONSTRUCTION: \$130,000

NO MORE THAN 2 STRUCTURAL DEVIATIONS OR PLANS MUST BE REDRAWN

DEPARTMENTAL USE ONLY

	INITIALS (IN)	DATE	INITIALS (OUT)	DATE
ZONING	<i>MR</i>	<i>4/8/19</i>		
INITIAL PERMITTING				
ADDRESSING				
PLAN REVIEW	<i>JP</i>	<i>4/23/19</i>	<i>JP</i>	<i>4/23/19</i>
FIRE REVIEW				
SEPTIC/SEWER				
FINAL PERMITTING				

PRELIMINARY PLOT PLAN FOR
BRANDYWINE HOMES

LOT 46, SLEDGE FARM SUBDIVISION, PH. I

25 SOUTH TREELINE DRIVE

M.B. 2005, PAGE 126

DUNN TOWNSHIP

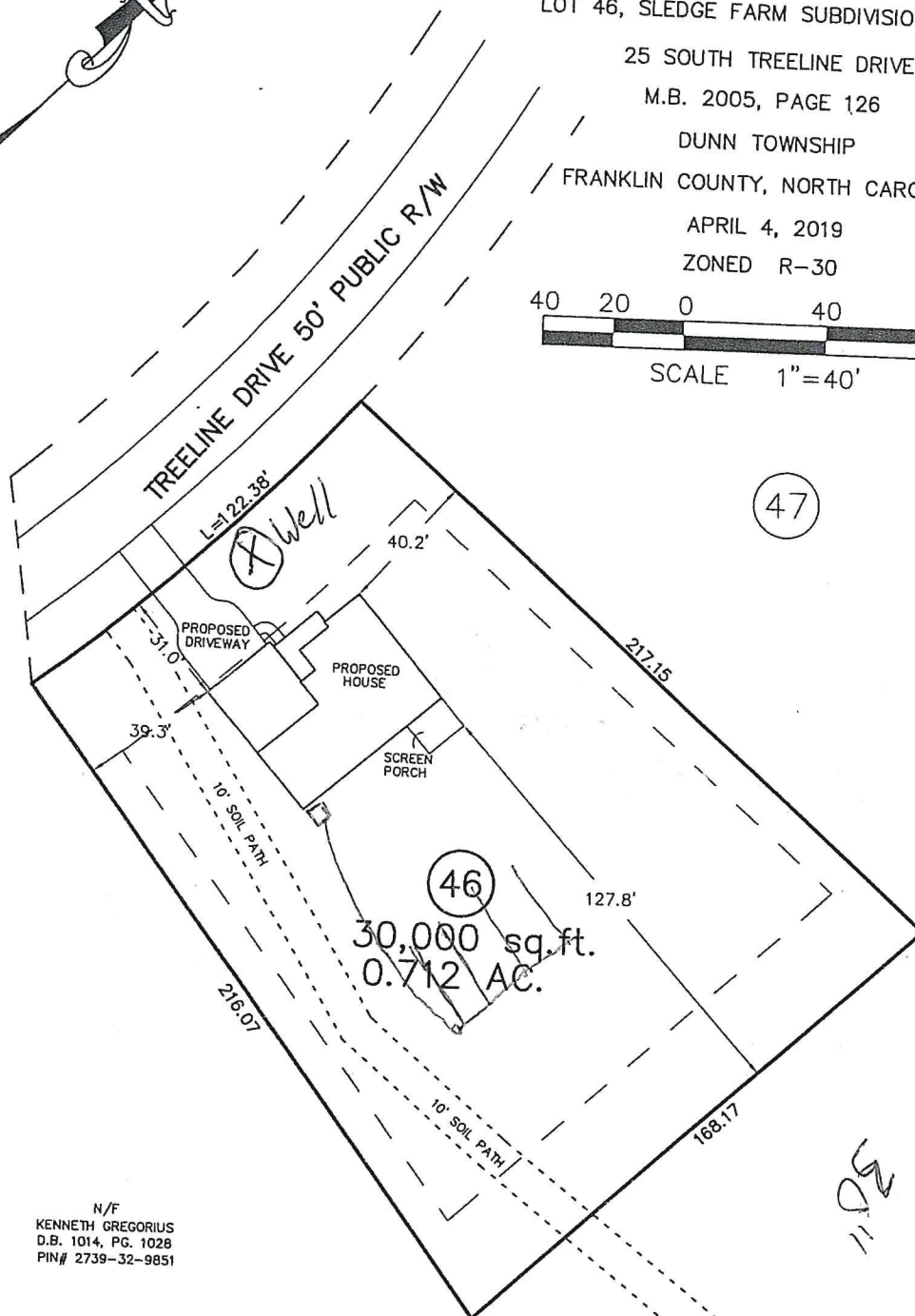
FRANKLIN COUNTY, NORTH CAROLINA

APRIL 4, 2019

ZONED R-30



SCALE 1"=40'



N/F
KENNETH GREGORIUS
D.B. 1014, PG. 1028
PIN# 2739-32-9851

THIS SURVEYOR DOES NOT
WARRANTY THE ACCURACY
OF ARCHITECTURAL DIMENSIONS.
THEY ARE TO BE VERIFIED BY
THE CONTRACTOR.

**CAWTHORNE, MOSS
& PANCIERA, P.C.**

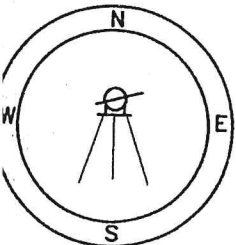
Professional Land Surveyors

239 E. Owen Ave.
Post Office Box 1253
Wake Forest, N.C. 27588
(919)556-3148

NOTES:

-THIS PLAN DOES NOT REFLECT AN
ACTUAL SURVEY. IT IS A PRELIMINARY
PLAN AND SHOULD BE USED FOR ITS
INTENDED PURPOSE ONLY.

-NOT FOR RECORDATION, CONVEYANCES,
OR SALES.



2739-33-3064